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|--|------------------------|-----------------------------------|--------|
| | Project Name & Details | INSPECTION & TEST PLAN | |
| | | REF. NO. | |
| | | REV. NO. | 0 |
| | | DATE : | |
| | | PAGE : | 1 OF 1 |

ACTIVITY: INSTALLATION, TESTING & COMMISSIONING OF WET CHEMICAL FIRE SUPPRESSION SYSTEM FOR KITCHEN HOODS
AREA/LOCATION:

ITP approved by CONTRACTOR's QA/QC:
Signature:
Date:

ITP approved by consultant:
Signature:
Date:

| SERIAL NO. | DESCRIPTION | FREQUENCY | SPECIFICATION/CRITERIA | INSPECTION LEVEL | | | | VERIFICATION RECORD |
|------------|--|--|-------------------------|------------------|------------|--------|------------|---------------------|
| | | | | ITL | CONTRACTOR | | consultant | |
| 1 | DOCUMENTATION | | | | | | | |
| 1.1 | Shop Drawing Approval | Each Shop Drawing | Project Specifications. | -- | | H | | H |
| 1.2 | Material Approval | Each MIR (prior to start ordering the material) | Project Specifications. | -- | | H | | H |
| 1.3 | Method Statement Approval | Once (Approval prior to start of activity) | Project Specifications. | -- | | H | | H |
| 2 | MATERIAL INSPECTION | | | | | | | |
| 2.1 | Check the Material as per approved submittal. | During Delivery | Project Specifications. | -- | | H | | H |
| 3 | INSTALLATION INSPECTION | | | | | | | |
| 3.1 | Check the installation as per approved drawing. Check the physical Installation of the system. | Area Wise or As instructed by consultant. | Project Specifications. | -- | | H | | H |
| 4 | Testing & Commissioning | | | | | | | |
| 4.1 | Testing & Commissioning for the Wet Chemical Fire Suppression System | Area Wise or As instructed by consultant. | Project Specifications. | -- | | H/W100 | | H/W100 |

LEGEND: H: HOLD W: WITNESS S: SURVEILLANCE R: REVIEW

ITP Sign-Off post completion of Works

| | | | |
|----------------------------|--|----------------------------|--|
| CONTRACTOR APPROVAL | | consultant APPROVAL | |
| NAME : | | NAME : | |
| SIGN : | | SIGN : | |
| DATE: | | DATE: | |